

CeMHOR Arkansas

Center for Mental Healthcare & Outcomes Research

VA HSR&D Center of Excellence

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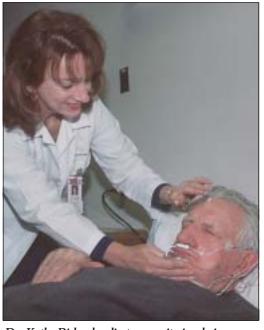


Mental Healthcare Report

Three grant awards fund research on sleep disturbance for veterans with dementia and respite care for their caregivers

he year 2002 will go down as a memorable one for Kathy Richards, PhD, RN, CeMHOR Research Health Scientist, who received notification of three major grant awards in recent months. The funding, almost \$3.5 million dollars over five years, is allowing the nurse educator/researcher to delve even deeper into sleep and behavioral disturbances among veterans diagnosed with dementia and respite care for their caregivers.

"Sleep and Behavioral Disturbance in Dementia" was funded for four years by HSR&D, and her VA Advanced Research Career Development Award (ARCDA) proposal, "Individualized Respite for Persons with Dementia," was approved for



Dr. Kathy Richards adjusts a monitoring device on a patient participating in one of her VA sleep studies.

2003-06. In addition, she has a five-year National Institute of Health-funded grant to study "Effect of Activities and Exercise on Sleep in Dementia."

Dr. Richards came to the VA in Central Arkansas in 1994 as Associate Chief Nurse, Research, after receiving a PhD in Nursing from the University of Texas. A Diplomate of the American Board of Sleep Medicine, she is Associate Professor of Nursing at the University of Arkansas for Medical Sciences (UAMS) and works out of the Geriatric Research Education & Clinical Center (GRECC) at the North Little Rock VA Medical Center.

As a graduate student, she developed an interest in ways to promote sleep in older people, studying sleep patterns of older veterans and the

effect of back massage or progressive muscle relaxation on their sleep.

"I was struck by the lack of treatment options for those veterans with dementia who did not sleep at night," Dr. Richards explained. An estimated 1.2 million veterans are diagnosed with cognitive impairments such as Alzheimer's disease.

She also observed that the main reason a family placed a loved one with dementia in a nursing home was the person's nighttime sleep disturbance, which often included wandering. Such nighttime wandering can sometimes lead to death or injury.

Dr. Richards had a personal reason for her interest in the subject. "My aunt was a nurse and a role model for me. She was diagnosed with dementia in her late 60s and became confused and disoriented, wandering away from home. She eventually lost her life because of that."

Dr. Richards' search for an institution strong in dementia research, grant writing and mentoring led her to Cornelia Beck, PhD, RN, the UAMS College of Nursing and the GRECC. Dr. Beck has been a major influence in her work, she said, as have her other mentors, Dennis Sullivan, MD, with GRECC and UAMS, and Don Bliwise, PhD, at **Emory University.**

Over the past three years Dr. Richards has examined factors associated with poor sleep, which led her to design nonpharmacological interventions—activity and exercise—to counter napping during the day. People with dementia nap out of sheer boredom and lack of activity, unable to do the things they once enjoyed, she said.



Dr. Richards and her research team studied residents from eight nursing homes and implemented activity interventions (games, hobbies, music, arts and crafts) in an experimental group at times of the day when the patients usually took naps. They learned that minutes of daytime sleep significantly decreased,

and nighttime sleep increased, in the group receiving interventions, while there was no change in the control group.

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Three grant awards

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"I also observed that caregivers would place their family member in a nursing home because there were no night respite services for caregivers.

"Caregivers were literally worn out from having to care for a family member who kept them up most of the night. Caregivers can tolerate a lot, but they cannot tolerate exhaustion and lack of sleep for very long."

The focus of Dr. Richards' new threeyear award is treatment of sleep disorders and sleep problems while at the same time giving nighttime support to the caregiver at home. "We've done focus groups and surveys with caregivers. They told us the biggest problem they have is at night."

The study will include four stages and involve patients with a dementia diagnosis who caregivers report have disturbed sleep at least three nights a week. The setting for the study will be a veterans' adult day care center adapted for overnight stays.

"During a six-week phase, the person with dementia can come several nights a week to sleep in the Respite Center while the caregiver gets a few nights of uninterrupted sleep at home," Dr. Richards said.



"While in the center, the patient will be assessed for other problems. In other studies, we've found a high incidence (up to 40%) of undiagnosed sleep disorders, such as obstructive sleep apnea, periodic limb movement disorder and restless legs syndrome, in older persons with dementia.

"So we plan to assess not only for other sleep disorders but also for poor sleep hygiene, and we'll try different treatments and interventions. Hopefully, we can send them home from the Respite Center in better shape than when they arrived."

As part of her research on sleep and behavioral disturbance funded by another grant, Dr. Richards will determine the relationship between sleep disorders and behavioral disturbance at night in 145 persons with dementia. Subjects will be recruited from VA and UAMS geriatric outpatient clinics.

Information on the presence of sleep disorders will be gathered through inter-

views, sleep histories and use of polysomnography—overnight tests to evaluate sleep disorders. The tests include monitoring airflow through the nose and mouth, electrocardiographic activity, blood oxygen level, brain wave pattern, eye movement, and the movement of respiratory muscle and limbs.

Dr. Richards' research could result in startling savings for the VA and a better quality of life for elderly veterans and caregivers.

"If effective treatment for nighttime sleep disturbance and disruptive behaviors allowed only 10% of the 1.2 million cognitively impaired veterans to stay at home an additional year, cost savings for VA nursing home care would amount to about \$10.3 billion," she pointed out. 4



Grant funds study of rural users of stimulants

Rural life generally conjures up pastoral scenes of farms and small, close knit communities where townsfolk live idyllic, less complicated lives than their urban coun-

terparts, away from problems of crime, drug use and violence.

Brenda Booth, PhD, CeMHOR Research Health Scientist, says this traditional picture of rural life is being shattered by recent studies showing economic and other

problems are taking their toll on rural America. Drug and alcohol abuse, use of stimulants such as amphetamines, and even methamphetamine (meth) production may be more prevalent in rural America than in urban metropolitan centers.

To get a better picture of the overall problem, Dr. Booth will use a \$6.1 million, 5-year grant to the University of Arkansas for Medical Sciences (UAMS) to study rural stimulant use and mental health services and outcomes in Ohio, Kentucky and Arkansas. The National Institute on Drug Abuse (NIDA) is funding the project.

"There is growing evidence that crack cocaine has spread to rural areas in the Midwest and that meth, from local manufacturing or sources out of state, has become a dominant drug in key sections of rural America," Dr. Booth said.

The newly funded project will expand an ongoing, rural Ohio study by Wright State University (WSU) at Dayton, funded in 2001 by NIDA, to two additional states: the Mississippi Delta of eastern Arkansas, home of almost 100,000 residents, and Appalachian Kentucky. These areas are generally described as medically under-

served and the most impoverished in the two states. The study will involve 450 active stimulant users from these areas who are not in treatment.

Dr. Booth, PI for the study, serves as Interim Director of the Center for Mental Healthcare Research at UAMS. The University of Kentucky in Lexington will also participate in the project. Co-investigators from CeMHOR and UAMS are John Fortney, PhD, and JoAnn

Kirchner, MD.

Researchers at WSU initially set out to study only crack users in rural Ohio and learn more about their drug use and use of health services. The WSU project was eventually expanded to include users of all stimulants, not just crack.

"We will enlarge the primary focus of the Ohio study to a broader-based natural history of rural stimulant drug use and health services, highlighting the critical role of co-occurring mental disorders," said Dr. Booth.

"We hope to learn more about the characteristics of rural stimulant users, patterns of rural polydrug use, the organization of stimulant use in non-urban areas, and the course or trajectory of stimulant use in rural inhabitants. We also hope to add to the knowledge of psychiatric comorbidity and criminal justice involvement among rural stimulant users."

Dr. Booth added that interaction with the criminal justice system will be a key measure in the study, given the high rates of meth involvement in arrests and crime in Arkansas and Kentucky. 4

Catching up with: James Warren



Connoisseur of programming and music

As a statistical programmer/coordinator, what do you do from day to day?

My job titles are Project/Program Manager and Programmer Coordinator, and I perform a daily balancing act, having to harmonize seemingly conflicting skills such as multi-tasking and attention to detail. Computer programming rewards a careful and meticulous approach. There's a tedious aspect to this line of work, but my intellectual curiosity is satisfied by the problem-solving and statistical challenges.

What projects are you working on now? I'm programming and analyzing code in SAS and ArcView GIS for a VA study led by Dr. Matt Maciejewski (PI) in Seattle and Co-PI Dr. John Fortney with

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2200 Fort Roots Dr., Bldg. 58 (152/NLR) North Little Rock, AR 72114 *Phone:* (501) 257-1727 *Fax:* (501) 257-1707 *E-mail:* Martha.Curtis@med.va.gov CeMHOR. I just began work on the new TEAM telemedicine project funded by the VA, under Drs. Fortney and Jeff Pyne. Although the VA Access Points study is over, I continue to work on refinement and output.

We hear you have a second career: as a part-time disk jockey. How did that happen?

Honestly, it's not even a second career. There's a reason Tom Petty's latest release is entitled The Last DJ. . . Radio and/or "pop-musicology" are strictly hobbies for me. Through serendipity, I ended up hosting a "guest-dj" hour one night in the mid-1990s on Little Rock's Magic 105.1 FM, a popular commercial radio station known for its classic/albumoriented rock music. The guest hour went well, and I followed it up by providing music one Sunday night for a "Lost Classics" segment that aired during the legendary "Beaker Street" radio program with Clyde Clifford. "Clyde" (real name: University of Arkansas for Medical Sciences employee Dale Seidenschwarz) and I hit it off. Soon, I was providing support and music for "Beaker Street" every Sunday evening from 7 until midnight.

What kind of music do you enjoy?

I like and listen to all kinds of music. As a famous musician said, "There are only two kinds of music: good and bad." I interpret this to mean the quality of a piece of music matters more than its category. After that, it's a matter of taste and appreciation. My favorite is the music of the socalled "prog-rock" period of the early-tomid-1970s. Well known bands were Yes, Genesis (Peter Gabriel era), ELP (Emerson, Lake & Palmer), Jethro Tull and Pink Floyd. Neglected and underrated, this is the type of stuff that primarily forms the subject of my weekly 30 minutes on the air during the middle (9:00-9:30) of "Beaker Street." We call the segment "Watcher of the Skies with Wil Warren."

When you were young, did you want to grow up and become a disk jockey or a computer programmer?

Whoa, you mean there were really kids who dreamed of becoming statistical pro-

grammers! I wasn't one of them. Maybe that helps explain why I don't have a statistics or mathematics degree and why I'm not a "real" statistical programmer.

Was statistical programming something you got interested in while in college?

I was an English major at Hendrix College. I didn't take any social statistics and wasn't interested in computers at the time. Before graduation, I relented and learned to use the campus computer lab instead of borrowing a word processor to write papers. My state of computer and statistics illiteracy was greatly remedied in graduate school (Master's in Public Administration from the University of Arkansas at Little Rock).

You're probably too young to remember when there weren't computers. Can you imagine being a statistician without one?
Or, as Daniel Zelterman, Yale University professor, puts it, do I "remember when the CARDS statement had a very different meaning"? (An inside/SAS reference.)
No, not exactly. Although my father is a structural engineer, and I sort of grew up around slide rules and blueprint machines, I quickly discovered that wasn't the life for me. It's my understanding that many modern statistical techniques would be nearly impossible without computer technology and software.

If you hadn't ended up doing statistical and computer programming, what would you be doing now?

I'm not much of a "the grass is always greener" sort of person. Plus, I really value the people and work environment we have in the CeMHOR/UAMS Centers for Mental Healthcare Research "family." I do have a passion for public policy. But I guess if I really make myself answer this question, it is to wish that I had enough talent to turn my music avocation into a related "dream" occupation: concert pianist, maestro conductor, or maybe even film-score composer. My wife, Meg, and I are both music lovers (with our own individual tastes, of course). One thing I am sure of is that music is a powerful force of creation. That's why I respect and care so much about its importance. 4

Hosting the 2003 National Meeting

By Richard R. Owen, MD, Director



As host for this year's HSR&D National Meeting, CeMHOR takes pride in the program planned for February 12-14 in Washington, DC. It has been a unique and satisfying experience to work for

the past six to eight months on conference planning.

JoAnn Kirchner, MD, Advanced Research Career Development Award recipient, is conference chair of the Career Development Conference on February 12 prior to the beginning of the national meeting late that day. JoAnn has spearheaded program planning for this conference, a one-day meeting featuring presentations, a panel discussion, a poster session and an address by Jonathan Perlin, MD, PhD.

The work of CeMHOR staff on the national meeting has involved everything from designing and publishing a web page, recruiting reviewers for abstracts, analyzing review scores, selecting abstracts for presentation, compiling the abstracts book, and arranging for two special speakers.

Without doubt, the hardest part of our host duties for the national meeting



was narrowing 451 submitted abstracts to fit the available program slots. Geoff Curran, PhD, of our staff and the 47 reviewers deserve

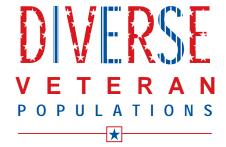
our thanks for an unenviable job.

BeforeThanksgiving, we sent e-mails to 156 presenters whose abstracts were accepted for the program: 74 plenary and concurrent paper presenters, 68 poster presenters and 14 workshop presenters. This year's meeting also has 15 breakout breakfast sessions on Friday.

Last year, 379 abstracts were submitted and 157, 41%, were accepted. The 156 abstracts accepted this year represent almost 35% of the 451 submitted.

We are honored that Junius Gonzales, MD, Chief of the NIMH Services Research & Clinical Epidemiology Branch, accepted our invitation to be keynote speaker Thursday morning. His topic is "The Complexity of Diversity: A Call to Action for Mental Health Services Research."

Those of us who heard mental health services consumer and advocate Moe Armstrong speak at a MIRECC workshop last spring know that our HSR&D colleagues will enjoy his opening dinner speech titled



Challenges & Opportunities

"Mental Illness from the Inside." Mr. Armstrong is Chair of the Veterans Committee and a Board member of the National Alliance for the Mentally Ill and is Director of Consumer and Family Affairs for Vinfen Corp. in Cambridge, MA.

We appreciate the assistance of last year's host, the Midwest Center for Health Services and Policy Research in Hines, IL, and Larry Brand there, especially with the structure of the web page. Their experience last year in designing this page was invaluable to us and meant we didn't have to reinvent the wheel. We also thank that Center for allowing use of its HSR&D server to publish the page.

Preparations for this year's meeting began later than usual since the meeting was not given final approval until August. It took a concerted team effort to overcome this and other obstacles (including Dr. Curran's assistant being bit by a brown recluse spider as reviews were coming in).

We thank the folks in the National Office and the Special Projects Office for their assistance and input. We've learned a great deal about how to prepare for this meeting and will look forward to a debriefing session on February 14 with staff from next year's host center, the Center for Health Quality, Outcomes, and Economic Research in Bedford, MA. 4

CeMHOR PEOPLE

Jacqueline Fickel, PhD, new VA Fellow, comes from the University of Texas (UT) at Austin where she received a doctorate from the LBJ School of Public Affairs last May. She is a former Evaluation Research Fellow at the Hogg Foundation for Mental Health at UT. In 2002 Dr. Fickel presented at national meetings of the American Public Health Association, National Academy for State Health Policy, and Academy of Health Services Research and Health Policy. Her doctoral dissertation was titled "Quality of Care Assessment: State Medicaid Administrators' Use of Quality Information."

Karen Berry, RN, is Depression Care Manager for VISN 16 TIDES (Translating Initiatives into Depression Effective Solutions) implementation. The TIDES project uses evidence-based quality improvement to improve the recognition and management of depression within primary care.

Tracy Johnson-Turner, RN, BSN, is a new Research Assistant who works on a depression study under Jeff Pyne, MD. She previously worked for a local mental health facility as UR/Casemanager Nurse.

Nancy Dockter, BA, new Technical Writer for JoAnn Kirchner, MD, is working on research projects related to treatment of depression and alcohol and substance abuse. She is also helping develop materials for a high school curriculum and website on treatment of mental illness, under a Science Education Partnership Award from the National Center for Research Resources, Clinical Research Division, NIH. A former newspaper reporter, Ms. Dockter is working on a master's degree in the UAMS College of Public Health. 4

National Meeting Web Page

For listings of workshop, paper, poster and breakfast sessions scheduled for the national meeting, go the web page located at:



www.hsrd2003.org